State of Kansas Kansas Department of Agriculture Records Center – Animal Health 109 SW 9th St., Topeka, KS 66612 Phone (785) 296-2326 Fax (785) 296-6418 www.ksda.gov

NON-RENEWAL OF LICENSE

(Please Print)

County:	
License Number	Date Submitted
Name_	
Mailing Address	City & Zip Code
Premise Address	City & Zip Code
Phone number where you can be contacted:	
Closing date	
Number of dogs/cats currently on property	(owned by anyone)
Are you keeping any animals?	If yes, please identify below:
PLEASE ATTACH DISPOSITION RECORDS. Your inspector will be conducting a closing inspection. Please list usual hours at your premise from 7 am - 7 pm, Monday through Friday:	
I understand and agree that beginning July both) during the license year, which runs fr limits I will be required to obtain a state lic my premise. It does not matter whether I o more than 19 animals on my premise, I am	1, 2011; I may only sell two litters of puppies or kittens (or om July 1 through June 30. If, at any time, I exceed these ense. This includes any sale or offer of dogs and/or cats from r someone else owns them. I also understand that if I maintain required to obtain a state license. I understand that failure to by the Kansas Pet Animal Act may result in the department
criminal penalty provided by law, the commissi	violation of act. (a) In addition to or in lieu of any other civil or oner, upon a finding that a person has violated or failed to comply or any rule and regulation adopted hereunder, may impose on such h violation.
Signature of Owner or Authorized Representati	ve Date